United States Bankruptcy Court District of Idaho

IN RE

HALE, Clyde 005-48-5139 1368 Galena Ct. Twin Falls, ID 83301

Case No.	99-42056
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200	_

DEBTOR(S)

Chapter 7

AMENDED

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

AMOUNTS SCHEDULED

	NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
.A	Real Property	Yes	1	128,922.00		
В	Personal Property	Yes	4	1,980.00		· · ·
С	Property Claimed as Exempt	Yes	1			
D	Creditors Holding Secured Claims	Yes	1		170,742.00	
Е	Creditors Holding Unsecured Priority Claims	Yes	1		0.00	
F	Creditors Holding Unsecured Nonpriority Claims	Yes	6		72,522.13	
G	Executory Contracts and Unexpired Leases	Yes	1			
H	Codebtors	Yes	1			
1	Current Income of Individual Debtor(s)	Yes	1			1,810.00
J	Current Expenditures of Individual Debtor(s)	Yes	1			1,780.00
	Total Number of Sheets o	f All Schedules	18			
			Total Assets	130,902.00		
				Tot al Liabilities	243,264.13	

cc: LDf/UST

Debtor(s)

AMENDED SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attached a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions only in Schedule C - Property Claimed as Exempt.

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property".

түре оғ раоректү	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMITION
1. Cash on hand.	Х			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account, Fountain Hill, AZ		0.00
Security deposits with public utilities, telephone companies, landlords, and others.	Χ			
4. Household goods and furnishings, include audio, video, and computer equipment.		Bed* Coffee table* Computer* Couch* Desk* End table* Fax/copier* Floor lamp* Glass table* Misc. decorative items* Misc. household linens* Misc. kitchen utensils and dishes Table lamp* Television* VCR*		50.00 75.00 500.00 90.00 75.00 35.00 260.00 50.00 45.00 35.00 30.00 50.00 100.00 50.00
 Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 	Х			

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
6.	Wearing apparel.		Debtor's clothing*		500.00
7.	Furs and jewelry.	Х			
8.	Firearms and sports, photographic, and other hobby equipment.	Х			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issue.	Х			
11.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	Х			
12.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
13.	Interests in partnerships or joint ventures. Hemize.	Х			
14.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
15.	Accounts receivable.	X			
16.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
17.	Other liquidated debts owing debtor including tax refunds. Give particulars.	Х			
18.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			-
19.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
20.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
21.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
	Licenses, franchises, and other general intangibles. Give particulars.	Х			
	Automobiles, trucks, trailers, and other vehicles and accessories.	Х			
24.	Boats, motors, and accessories.	Х			
25,	Aircraft and accessories.	X			

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
26. Office equipment, furnishings, and supplies.	X			
27. Machinery, fixtures, equipment, and supplies used in business.	X			
28. Inventory.	Х			
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	Х			
31. Farming equipment and implements.	Х			
32. Farm supplies, chemicals, and feed.	Х			
33. Other personal property of any kind not already listed, such as season tickets. Itemize.	X			
		*located at Debtor's residence		
	<u> </u>		Щ	

TOTAL

1 980 00

Debtor(s)

amended SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. § 522(b)(1). Exemptions provided in 11 U.S.C. § 522(d). Note: These exemptions are available only in certain states.

11 U.S.C. § 522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for 180 immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT MARKET VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
Household goods and furni	shings		
Bed* Coffee table* Computer* Couch* Desk* End table* Fax/copier* Floor lamp* Glass table* Misc. decorative items* Misc. household linens* Misc. kitchen utensils and dishes Table lamp*	IC 11-605(1)(a)	50.00 75.00 500.00 90.00 75.00 35.00 260.00 50.00 45.00 35.00 30.00 50.00	
Television* VCR*	IC 11-605(1)(a) IC 11-605(1)(a)	100.00	100.00
Wearing apparel			
Debtor's clothing	IC 11-605(1)(b)	500.00	500.00

(Report total also on Summary of Schedules)

Debtor(s)

AMENDED

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C", respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS	C O D E B	H W J C	DATE CLAIM WAS INCURRED NATURE OF LIEN AND DESCRIPTION AND MARKET VALUE OF PROPERTY	C O N T I N	U N L I Q U	D 1 S P U T	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
INCLUDING ZIP CODE	n R		SUBJECT TO LIEN	G E N T	D A T E D	E D	UNSECURED PORTION, IF ANY
ACCOUNT NO.None			2/99: second deed of	T			
Carroll, Ray C/O Re-Max 1434 Pole Line Rd. E			trust in residence				36,000.00
Twin Falls, ID 83301			Value \$ 128,922.00	-			36,000.00
ACCOUNT NO.	1	T	11/98: ring	†	T		
Jensen's Jewelers 1485 Pole Line Road #171 Twin Falls, ID 83301							3,142.00
			Value \$	\dagger			
ACCOUNT NO.			2/99: deed of trust on residence				101 600 00
Long Beach Mortgage P.O. Box 650780 Dallas, TX 75265-0780							131,600.00
			Value \$ 128,922.00	-			2,678.00
ACCOUNT NO.							
			Value \$				
O Continuation Sheets attached			(Total		Subte is pa		170,742.00
			(Complete only on last sheet of Schedule	D) 1	гот	AL	170,742.00

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Case No. 99-42056

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H","W","J", or "C", respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	L L Q	P U T E	AMOUNT OF CLAIM
Account No.21133410438024 Associates P.O. Box 9367 Des Moines, IA 50306-9367			1999; misc. credit purchases				3,150.00
ACCOUNT NO.4700000844132720 Avco P.O. Box 9089 Des Moines, IA 50369			1999; misc. credit purchases				1,372.62
ACCOUNT NO. Bank Of America P.O. Box 84000 Seattle, WA 98184-3500			8/98: residual liability after surender of collateral				Unknown
ACCOUNT NO. Channel 38 P.O. Box 7 Boise, ID 83707			2/99: advertising				500.00
5 Continuation Sheets attached			(Total o (Complete only on last sheet of Schedule F	f thi		ge)	5,022.62

(Report total also on Summary of Schedules)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOPF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E	D I S P U T E D	AMOUNT OF CLAIM
ACCOUNT NO. Clark, Eric R. Hutchinson, Lammers & Clark P.O. Box 207 Twin Falls, ID 83303-0207			1998-99: legal services				570.00
ACCOUNT NO. Commnet Cellular P.O. Box 78434 Phoenix, AZ 85062-8434			To 1999: phone service				3,873.52
ACCOUNT NO. Conseco Finance 345 St. Peter Street St. Paul, MN 55102-1639			9/99: residual liability after surrender of collateral				Unknown
ACCOUNT NO. Conseco Finance 345 St. Peter Street St. Paul, MN 55102-1639			9/99: residual liability after surrender of collateral				Unknown
Account No.5458000177095280 Direct Merchants 4500 S. Garnett Rd., #500 Tulsa, OK 92850-7042			1999; misc. credit purchases				5,365.59
Subtotal Sheet 1 of 5 Continuation Sheets attached to Schedule F (Total of this page) 9,809.11 (Complete only on last sheet of Schedule F) TOTAL							

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	1	D I S P U T E D	AMOUNT OF CLAIM
ACCOUNT NO.63398			4/00: misc. services				
Employment Solutions 155 2nd Ave. N., Ste. 3 Twin Falls, ID 83301							541.12
ACCOUNT NO.1859		\vdash	4/00: membership	\vdash			
Falls Avenue Fitness Unlimited, Inc. 798 Falls Ave. Twin Falls, ID 83301							500.00
ACCOUNT NO.			Assignee or other				
Advanced Collection Tech. P.O. Box 447 Twin Falls, ID 83303-0447			notification for: Falls Avenue Fitness				
ACCOUNT NO.			Assignee or other				
Bonded Collections Phoenix 244 N Country Club Ste 208 Mesa, AZ 85201-6527			notification for: Falls Avenue Fitness				
ACCOUNT NO.			1/99: insurance	-		\dashv	
Farm Bureau Of Idaho P.O. Box 4848 Pocatello, ID 83205-4848							291.45
Subtotal							
Sheet 2 of 5 Continuation Sheets attached to Schedule F (Total of this page) 1,332.57 (Complete only on last sheet of Schedule F) TOTAL							

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T t N G E N T	U N L U U I D A T E	D I S P U T E	AMOUNT OF CLAIM
ACCOUNT NO. Fleet Card One Federal St. Boston, MA 02110-0210			6/98: misc. purchases				3,300.00
ACCOUNT NO.240716 Great Basin Trucks, Inc. 2300 South 4000 West P.O. Box 701050 West Valley City, UT 84170			9/2/99: misc. services				192.24
ACCOUNT NO.240686 Great Basin Trucks, Inc. 2300 South 4000 West P.O. Box 701050 West Valley City, UT 84170			9/2/99: misc. services				136.28
ACCOUNT NO. Great Dane Financial 222 N. LaSalle St. #1000 Chicago, IL 60601			10/99: trailer				44,460.00
ACCOUNT NO. Hale, Kelly C/O Jeff Stoker P.O. Box 1597 Twin Falls, ID 83303-1597			6/98: residual liability from divorce				Unknown
Sheet 3 of 5 Continuation Sheets attached to Schedule F (Total of this page) 48,088.52 (Complete only on last sheet of Schedule F) TOTAL							

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	O D E B T O R	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E	P U T E	AMOUNT OF CLAIM
ACCOUNT NO.			9/97: residual				
Mercedez-Benz Dept. CH#10548 Palatine, IL 60055-0548			liabillity after surrender of collateral				Unknown
ACCOUNT NO.			To 1999: misc. purchases				
Providian P.O. Box 904 Memphis, TN 38101-0904							451.18
ACCOUNT NO.			1999: bookkeeping			Χ	
Renee's Computer Addiction 220 Sycamore St. Twin Falls, ID 83301			service				612.00
ACCOUNT NO.2516156637601		Н	1999: collection for		Χ		
RMA-CC P.O. Box 105195 Atlanta, GA 30348-5195			AT&T CARM - WIRELESS				1,000.21
ACCOUNT NO.			To 3/00: misc. services				
Transportation Management Specialists 1578 W. 1700 South, Ste 105 Salt Lake City, UT 84104							2,283.68
Sheet4 of5 Continuation Sheets attached to Schedule F (Total of this page)						- 1	4,347.07
			(Complete only on last sheet of Schedule F		-		<u> </u>

(Report total also on Summary of Schedules)

					_			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	C C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLA IF CLAIM IS SUBJECT TO SETOFF, SO STATE		C O N T I N G E N T	U N L I Q U I D A T E	D I S P U T E D	AMOUNT OF CLAIM
ACCOUNT NO.5417380335634150 U.S. Bank Credit Line P.O.Box 6324 Fargo, ND 58125			1999: misc. purcha	ses				3,922.24
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Subtotal Subtotal Sheet 5 of 5 Continuation Sheets attached to Schedule F (Total of this page)								3,922.24
(Complete only on last sheet of Schedule F) TOTAL							72.522 13	

AMENDED

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status	DEPENDENTS OF DEBTOR AND SPOUSE											
Married	NAMES		AGE	RELATIONSH	IP							
Employment:	DEBTOR			SPOUSE								
Occupation Name of Employer How long employed Address of Employer	Hair Stylist Jean-Michel 2 Mos. 7038 E. Main St. Scottsdale, AZ 85251											
Income: (Estimate of Current monthly gro (pro rate if not po Estimated monthly o SUBTOTAL			\$ <u>2</u>	DEBTOR 2,210.00 \$ 2,210.00 \$	SPOUSE							
b. Insurancec. Union duesd. Other (Speci	DEDUCTIONS s and Social Security fy) YROLL DEDUCTIONS		\$ \$ \$ \$ \$	400.00 \$								
TOTAL NET MONT	THLYTAKE HOME PAY		\$ 1	.,810.00 \$_								
(attach detailed s Income from real pro Interest and dividend Alimony, maintenanc debtor's use or that Social Security or oth Specify Other monthly incom Specify	perty s e or support payments payable to the deb of dependents listed above er government assistance ee	otor for the	\$\$ \$\$ \$\$	\$ \$ \$ \$ \$								
TOTAL MONTHLY	INCOME		\$ \$ 1	\$_ .,810.00\$								
TOTAL COMBINE	DMONTHLYINCOME \$ 1,81	0.00			mary of Schedules							

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

None

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__ Case No. <u>99-42056</u>

AMENDED

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household.	Complet	e a separate
schedule of expenditures labeled "Spouse".	ounpie	o a coparaco
Rent or home mortgage payment (include lot rented for mobile home)	\$	825.00
Are real estate taxes included? Yes No _X	<u></u>	
Is property insurance included? Yes No _X		
Utilities: Electricity and heating fuel	\$	50.00
Water and sewer	\$	
Telephone	\$	70.00
Other Home maintenance (repairs and upkeep)	\$	
	\$	45.00
Food	\$	<u> 175.00</u>
Clothing	\$	<u> 175.00</u>
Laundry and dry cleaning	\$	<u>35.00</u>
Medical and dental expenses	\$	20.00
Transportation	\$	<u> 130.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
Charitable contributions	\$	
Insurance: (not deducted from wages or included in home mortgage payments) Homeowner's or renter's		
Life	\$	50.00
Health	\$	
Auto	\$	60.00
Othon	\$	60.00
Taxes (not deducted from wages or included in home mortgage payments)	\$	
(Specify)	\$	
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan Auto		
	\$	
OtherOther	\$	
OtherAlimony, maintenance, and support paid to others	 \$	
Payments for support of additional dependents not living at your home	 \$	
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ \$	
Other personal care	\$	95.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	1,780.00
(EOD CHAPTED 19 AND 19 DUDTODG ONLY)		
(FOR CHAPTER 12 AND 13 DEBTORS ONLY)		
Provide the information requested below, including whether plan payments are to be made bi-weekly or at some other regular interval.	y, month	ly, annually,
A. Total projected monthly income	*	
A. Total projected monthly income B. Total projected monthly expenses	\$	
C. Excess income (A minus B)	5	
	\$	
D. Total amount to be paid into plan each	Ф	

(interval)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury th	at I have read the foregoir	ng summary and schedules, consisting of4
		(Total shown on summary page plus 1)
sheets, and that they are true and co	orrect to the best of my kn	owledge, information, and belief.
	•	
Date: January 19, 2001	Signature:	
		lyde
		- Deptor
Date:	Signature:	
		(Joint Debtor, if any)
		[If joint case, both speuses must sign.]
CERTIFICATION OF NO	ON-ATTORNEY BANKRUPTO	CY PETITION PREPARER (See 11 U.S.C. § 110)
		110, that I prepared this document for compensation, and that I have
provided the debtor with a copy of this docum	ient.	110, that I prepared this document for compensation, and that I have
Printed or Typed Name of Bankruptcy Petition Preparer	, <u>, , , , , , , , , , , , , , , , , , </u>	Social Security No.
Address		
Names and Social Security numbers of all oth	per inflividuals who prepared on	applicated by purpositing this document.
// \\		
n more than one person prepared this docum	ient/a ttach additional isigned she	ets conforming to the appropriate Official Form for each person.
Signature of Bankruptcy Petition Preparer		Date
A bankruptcy petition preparer's failure to comply wi 11 U.S.C. § 110; 18 U.S.C. § 156.	th the provision of title 11 and the Fe	deral Rules of Bankruptcy Procedures may result in fines or imprisonment or both.
DEGLADATION INVOIDED DON		
DECLARATION UNDER PENA	ALTY OF PERJURY ON	BEHALF OF CORPORATION OR PARTNERSHIP
I, the		(the musilent on all on
		(the president or other
officer or an authorized agent of the	corporation or a member	or an authorized agent of the partnership) of the
	****	(corporation or partnership) named as debtor in this case,
doolong under nanolter of a minus the		
declare under penalty of perjury that	I have read the foregoing	summary and schedules, consisting of
sheets, and that they are true and co	proof to the heat of my lan	(Total shown on summary page plus 1)
shoots, and that they are true and co	arece to the best of my kir	owiedge, information, and benef.
Date:	Signature:	
		
An individual signing on behalf of a partners	hip or corporation must indicate	(Print or type name of individual signing on behalf of debtor)
-	-	

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.